CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

CG

COVER PAGE

Date Initial Filing Received Official Use Only

Please type or print in ink.

AME OF FILER (LAST)	(FIRST)	(M IDDLE)
Rocha	Mary Helen	
. Office, Agency, or Court		A. C.
Agency Name (Do not use acronyms)		APR CR
Division, Board, Department, District, if applicable	Caty Council	78 OE 9
Division, Board, Department, District, if applicable	Your Position	2
▶ If filing for multiple positions, list below or on an attachment. (Do no	ot use acronyms)	± 5>
		1:32
Agency: Lity of Antrock as Successor A Housing Successor to the Ar	Position:	
Jurisdiction of Office (Check at least one box)	The serie of want stand	
☐ State	☐ Judge or Court Commissioner (State)	wide Jurisdiction)
Adulti County	County of	
City of City 1 Antrock		
LA City of	Other	
Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2014, through	Leaving Office: Date Left/_	
December 31, 2014.	(Check one)	
The period covered is/, through December 31, 2014.	gh O The period covered is January 1 leaving office.	, 2014, through the date of
Assuming Office: Date assumed/	The period covered is/_ the date of leaving office.	, through
Candidate: Election year and office sough	ht, if different than Part 1:	
Schedule Summary		:n
Check applicable schedules or "None." ► To	otal number of pages including this co	ver page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business	Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule a	attached
Schedule B - Real Property - schedule attached	□ Schedule E - Income − Gifts − Travel Pay	ments - schedule attached
-or-	nterests on any schedule	
Voisination		
I certify under penalty of perjury under the laws of the State of		
Date Signed Much 30, 2015		
(month, day, year)		

SCHEDULE D Income - Gifts



► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
Puipe Gas Electric	WELL
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
	930 Colorado Blud Bld 2 Libral 9000
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
2,22,2014 \$ 100 2 dinner tiles	3/28/2014 150 Hotel Rom Secremento
\$	3/28/2011 Holding In Secrement
	\$
NAME OF SOURCE (Not an Acronym) ∠ B E N 3 ≥ ≥	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1875 Arnold Dr Mertinez	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
612712013 \$ 75° 1 dinner	
	\$
\$	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Kaiser Permanente	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
9,25,2014s 75 1 dinner	
	\$
	\$
Comments:	